## APR 1 1 2007

PTO/SB/22 (09-08)
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PETITION FOR EXTENSION OF TIME UNDER 37 FY 2006	Docket Number (Optional) MWS-041						
(Feas pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)							
Application Number 09/910,170-Conf. #1865		Filed Ju	ıly 20, 2001				
For PARTITIONING FOR MODEL-BASED DESIG	N .						
Art Unit 2161		Examiner	F. Coby				
This is a request under the provisions of 37 CFR 1.13 identified application.							
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):							
One month (37 CFR 1.17(a)(1))	<u>Гее</u> \$120	<u>Small Entity Fee</u> \$60	\$				
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$				
X Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 1,020.00				
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$				
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$				
Applicant claims small entity status. See 37 C	FR 1.27.						
A check in the amount of the fee is enclosed.			·				
Payment by credit card. Form PTO-2036 is at	ttached.						
The Director has already been authorized to c		application to a Depos	It Account.				
X The Director is hereby authorized to charge an							
Deposit Account Number 12-0080	I have encl	osed a duplicate copy	of this sheet.				
I am the applicant/Inventor.							
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).							
x attorney or agent of record. R	egistration Numbe	r <u>L0248</u>					
attorney or agent under 37 CF	R 1.34.						
Registration number if acting un	nder 37 CFR 1.34		·				
Carifornia		April 11, 2007					
Signature		Date					
EulHoon Lee Typed or printed name		(617) 227-7400 Telephone Number					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more							
NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Souther multiple forms in their than one signature is required, see below.							
Total of 1 forms are subn	niπed.						

I hereby certify that the	s paper (along with any paper referra	d to as being attache	ed or enclosed) is be	eing transmitted by	faceimile to the Patent ar
	simile no. (571) 273-8300 et MS AF. (	Commissioner for Pa	tents, P.O. Box 145	50, Alexandria, VA	22313-1450, on the date
shown below.	٠٠٠٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ - ١٠٠٠ -				

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